

## **Don't Cut the Title X Family Planning Program**

The final FY 2011 funding resulted in a \$18.1 million mid-year cut the Title X program. Further reductions to the Title X program will jeopardize the health of millions who depend on family planning providers for their care.

**NFPRHA strongly opposes any cut or proposal to defund Title X and asks Congress to oppose any further effort to cut the Title X program. Stand with the millions of women and men across the country who seek cost-effective preventive health care from the Title X network.**

Cutting the Title X program, along with making reductions to many other important public health programs, is reckless and short sighted, coming at a time when the need for care is so great. Some in Congress are heartlessly attacking what is often the only source of health care for the most vulnerable in our society. This is a fiscally irresponsible attack on access to essential health care.

## **Oppose Any Cut to Title X**

**The Title X family planning program has a proven record of *saving* money.** For 40 years, family planning services and supplies provided through Title X-funded health centers have prevented unintended pregnancies—nearly half of which would have likely ended in abortion—improved public health, and ***saved billions*** in taxpayer dollars.

- In 2009, Title X-funded providers served more than five million low-income men and women at more than 4,500 service delivery sites – an increase of more than 130,000 patients over 2008. ***This is the largest patient increase in the last 10 years,***<sup>i</sup> and stems from the worst recession the United States has seen in 70 years.
- ***Seventy percent of patients have incomes at or below the federal poverty level (FPL)—meaning they earn less than \$10,890 per year.***<sup>ii</sup> These patients receive services at no cost to them—their care is fully subsidized by public funding.
- ***Title X patients are disproportionately black and Latino***, with 20% of Title X patients self-identifying as black and 28% as Latino,<sup>iii</sup> as compared to 12.9% and 15.8% of the nation, respectively.

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- *For every public dollar invested in family planning care, nearly \$4 in Medicaid expenditures are averted.*<sup>iv</sup>
- *Family planning services at Title X–funded health centers helped prevent 973,000 unintended pregnancies* in 2008, which would likely have resulted in 432,600 unintended births and 406,200 abortions.<sup>v</sup>
- The direct medical costs associated with unintended pregnancies in 2002 were \$5 billion.<sup>vi</sup> Title X–funded services produce significant cost savings to the federal and state governments; *services provided at Title X–supported clinics accounted for \$3.4 billion in such savings in 2008 alone.*<sup>vii</sup>
- Ninety–two percent of Title X patients have incomes at or below 250% FPL (\$27,075 per year), and receive services at a discounted rate—paying less than the cost of the services and supplies they receive.
- In 2009, 2.2 million Pap tests, over 2.3 million breast exams, 5.9 million STD tests, and nearly 1 million confidential HIV tests were performed.<sup>viii</sup>

### **Enough Is Enough**

Further cutting the Title X program would be catastrophic for millions of low–income people. Cutting other important public health programs like the Title V Maternal and Child Health Block Grant, the Centers for Disease Control and Prevention (CDC), and the community health centers program will further shred the safety net that millions of people rely on now more than ever.

### **NFPRHA asks Congress to block any efforts to cut Title X.**

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<sup>i</sup> RTI International, *Family Planning Annual Report: 2009 National Summary* (November 2010). Available online at [http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar\\_2009\\_national\\_summary.pdf](http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar_2009_national_summary.pdf).

<sup>ii</sup> *Ibid.*

<sup>iii</sup> *Ibid.*

<sup>iv</sup> Frost, JJ., Finer, LB., & Tapales, A. (2008). The impact of publicly funded family planning clinic services on unintended pregnancies and government cost savings. *Journal of Health Care for the Poor and Underserved*, 19(3):778–796.

<sup>v</sup> Guttmacher Institute, *Contraceptive Needs and Services: National and State Data, 2008 Update*, (May 2010). Available online at <http://www.guttmacher.org/pubs/win/contraceptive-needs-2008.pdf>.

<sup>vi</sup> *Healthy People 2020*. Available online at <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=13>.

<sup>vii</sup> Frost, JJ., Finer, LB., & Tapales, A. (2008). The impact of publicly funded family planning clinic services on unintended pregnancies and government cost savings. *Journal of Health Care for the Poor and Underserved*, 19(3):778–796.

<sup>viii</sup> *Family Planning Annual Report: 2009 National Summary*.

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